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THE GLOBAL IMPACT OF TOBACCO USE: 500 MILLION DEATHS

World No-Tobacco Day, May 31, 1990

If current tobacco consumption trends continue, one out of ten people living in the world today -- or some 500 million people -- will die of easily preventable, tobacco-related diseases, according to the World Health Organization (WHO).

In an effort to help change current patterns of tobacco use, the World Health Organization proclaims May 31, 1990 as the third annual World No-Tobacco Day and urges smokers to abstain from tobacco for 24 hours in the hope that smokers can break their tobacco habits.

Hiroshi Nakajima, M.D., Ph.D., Director-General of WHO, calls for a renewed assault on smoking and tobacco use which he says should ultimately be eliminated, creating a "tobacco-free" society.

"The consumption of tobacco is a habit responsible for three million premature deaths each year, or approximately one death every 10 seconds," Dr. Nakajima says. "This is all the more tragic, because this habit is the most preventable of all causes of disability and death in the world today."

The principal tobacco-related diseases are cancer (especially lung cancer), chronic bronchitis and emphysema, and coronary heart disease and stroke.

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The impact of tobacco use in many countries is alarming. Deaths attributable to tobacco use number about 700,000 a year in Europe, 400,000 a year in the United States, and 400,000 a year in the Soviet Union. Mortality and morbidity data for the developing countries are less accurate, but the toll from tobacco use is believed to be rising in China, Brazil, Egypt and Thailand.

Not only are smokers dying from their tobacco habit, but they are dying at an earlier age than non-tobacco users. Recent WHO data show that the lives of smokers of middle age (35 to 69 years of age) can be shortened by 15 - 20 years because of tobacco use.

The impact of tobacco production use in numerical terms is staggering. World cigarette production continued to increase in 1988. Profits from this trade are high, as are the tobacco taxes collected by governments.

"Strong political will and commitment are needed to stop people's dependence on tobacco, and governments' 'addiction' to tobacco taxation revenue," says Dr. Nakajima.

One worrisome trend for WHO experts is the targeting by tobacco companies of children and young adults. This trend is why the theme of this year's World No-Tobacco Day is "Childhood and Youth Without Tobacco".

"It is not enough to offer young children and adolescents the choice between tobacco or health," says Dr. Nakajima. "For the sake of their health, it is necessary to guide them in making the choice. Every child should have the right to grow up without tobacco."

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The tobacco industry spends millions of dollars on advertising which presents a flattering, often dazzling, image of smoking. Smoking is pictured as part of a dream, a symbol of social status, and an integral ingredient of life.

In some quarters, this advertising is working. It is estimated that every day about 3000 adolescents take up smoking in the U.S. The majority of new smokers are hooked before the age of 19. However, the fact is that tobacco use is starting at earlier ages, sometimes as early as eight, and on the average, between 11 and 13, particularly among young women in industrialized countries.

The puzzle rests, therefore, in understanding why young people start smoking and why they continue. Data collected from Canada, the United Kingdom and the U.S. show that adults from the lower socioeconomic groups are more likely to smoke than those from higher income groups and that a lower level of parental education also is a factor in their children taking up the habit. Other studies have shown that if a mother smokes, her children are more likely to become smokers; unemployment is a factor among women.

In addition, adolescence is the dynamic period of development when the young begin to draw away from their parents and to develop intense relationships with peers from whom they seek approval. Many young people see tobacco use as normal social behavior, and this is often reinforced by the media.

Advertising links tobacco with fun, maturity, and an image of the "modern" man or woman. There is evidence that advertising directly influences the decision to start smoking. Studies show that in

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countries such as Norway, where tobacco advertising has been restricted, there has been a reduction in smoking prevalence among young people.

One example of the influence of advertising is the campaign created to promote "smokeless" tobacco - snuff and chewing tobacco which was aimed at teenage boys in North America and Scandinavia. According to studies cited by WHO, in the U.S., more than \$35 million was spent on television and magazine advertising to promote snuff and chewing tobacco in 1985, involving celebrity promotions, distribution of free samples to college students, and magazine advertisements.

In the U.S., sales for snuff rose by 55 percent between 1978 and 1985. It is estimated 16 million people in the U.S. use smokeless tobacco today. The International Agency for Research on Cancer and the United States Surgeon General have concluded that the use of smokeless tobacco causes oral cancer.

Tobacco use can affect infants even before they are born. The fetus of mothers who smoke while pregnant can suffer from Fetal Tobacco Syndrome. This syndrome is caused by nicotine and carbon monoxide entering the bloodstream of the fetus and damaging the supply route for oxygen and food. This can lead to lower birth weight, poor growth and size at birth, and possible congenital defects and infections. Smoking during pregnancy has been associated with premature birth, spontaneous abortions, and fetal and perinatal deaths.

Risk associated with smoking continue after birth and affect the newborn baby and other children at home. Infants can absorb harmful chemicals from breastmilk.

Few regular smokers are aware that over the course of a year, their children may be absorbing, through "passive" smoking, the amount of nicotine contained in 30 to 80 cigarettes. One study found that some Japanese schoolchildren had smoke-related chemicals in their urine in direct proportion to the number of cigarettes their parents smoked.

Health problems among children who live with smokers include:

- Higher incidence of respiratory infections;
- More common chronic cough, phlegm and wheezing;
- Slower growth and lung development; and
- More common chronic middle ear infections.

WHO says there is no single, proven way to promote non smoking and to prevent the use of tobacco by adolescents. However, WHO believes a number of strategies, when combined, have proven effective:

- Appropriate and culturally-specific health education;
- Peer-led, anti-smoking initiatives in schools;
- Prohibiting cigarettes sales to young people and limiting easy availability;
- Increasing the cost of cigarettes. For example, by increasing taxes; and
- Promoting the setting aside of no-smoking areas, especially in public places.

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